## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Eπective December 8, 2004									10/567692				
CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
บ.ร	. NATIONAL	STAGE FEES				· <u>·····</u>	]	RATE	FEE	1	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LARC	SE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE		
EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50/\$100		her situations = 100 / \$ 200	1	EXAM. FEE		i	EXAM. FEE	300 200	
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All ot	her situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =	*,		X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			/3 mir	nus 20 =	•			X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	/ minus 3 = .					X \$ 100 =		OR	X \$ 200 =		
		DENT CLAIM PRI						+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL									OR	TOTAL	900		
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							<b>.</b>	SMALL ENTITY			OTHER THAN R SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AME	independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT. FEE									OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)													
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	±±		=		X \$ 25 =		OR	X \$ 50 =		
AME	<b>ind</b> ependent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE		
*	If the entry in colu	umn 1 is less than the	e entry in column 2 id For" IN THIS SF	۲, write "0" i ACE is les	in colum	n 3. 0'. enter "20".							

FORM PTO-875 (Rev. 02/2005)

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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